## PART B - FEE(S) TRANSMITTAL Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 JUN 0 6 2008 Alexandria, Virginia 22313-1450 or Fax (571)-273-2885 INSTRUCTION FEE (if required). Blocks 1 through 5 should be completed where appropriate:—Ani-further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrections below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications. Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 7590 03/25/2008 28886 Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below. CLARK HILL, P.C. 500 WOODWARD AVENUE, SUITE 3500 DETROIT, MI 48226 (Depositor's name <u> Hoggarth</u> (Signature) (Date CONFIRMATION NO. ATTORNEY DOCKET NO. FIRST NAMED INVENTOR APPLICATION NO. FILING DATE 5107 19365-105214 05/02/2006 Micah R. Jones 10/577.969 TITLE OF INVENTION: MULTI PURPOSE SEAT BACK PROTECTING PANEL DATE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE **ISSUE FEE DUE** APPLN, TYPE SMALL ENTITY \$1740 06/25/2008 \$0 nonprovisional NO \$1440 \$300 06/06/2008 EFLORES1 00000012 10577969 CLASS-SUBCLASS **EXAMINER** ART UNIT 01 FC:1504 300.00 OP 297-188040 MCPARTLIN, SARAH BURNHAM 02 FC:1501 <u> 440.00 NP</u> 1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list Clark Hill PLC (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer listed, no name will be printed. Number is required.

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

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(B) RESIDENCE: (CITY and STATE OR COUNTRY)

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Newmarket, Ontario, Canada

Please check the appropriate assignee category or categ	ories (will not be printed on the patent):	Individual XX Corporati	ion or other private group entity Government
a. The following fee(s) are submitted:	4b. Payment of Fee(s):		iously paid issue fee shown above)

△ Issue Fee Payment by credit card. Form PTO-2038 is attached. XX Publication Fee (No small entity discount permitted)

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5. Change in Entity Status (from status indicated above)

□ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

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41,5900 Registration No.

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